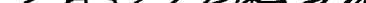


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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>	Complete If Known <table border="1"> <tr> <td>Application Number</td> <td>10/774,086</td> </tr> <tr> <td>Filing Date</td> <td>02/06/2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Ihung S. Tu</td> </tr> <tr> <td>Art Unit</td> <td>3661</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Attorney Docket Number</td> <td>ALPINE.044AUS</td> </tr> </table>	Application Number	10/774,086	Filing Date	02/06/2004	First Named Inventor	Ihung S. Tu	Art Unit	3661	Examiner Name		Attorney Docket Number	ALPINE.044AUS
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Examiner Signature		Date Considered	3/6/5
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